

# A Successful Tele-Infectious Disease Practice

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# Bringing Telemedicine to your Practice

Telemedicine is a tool/modality with as many applications as there are people using it

- You will need to think about some common patient problems you encounter in your practice and choose several that you think can be handled successfully on Telemedicine
- Need to determine what ancillary data is needed and how to receive it before the Telemedicine visit
- Just get started! You will learn by trial and error

# My Disease Specialty is HIV

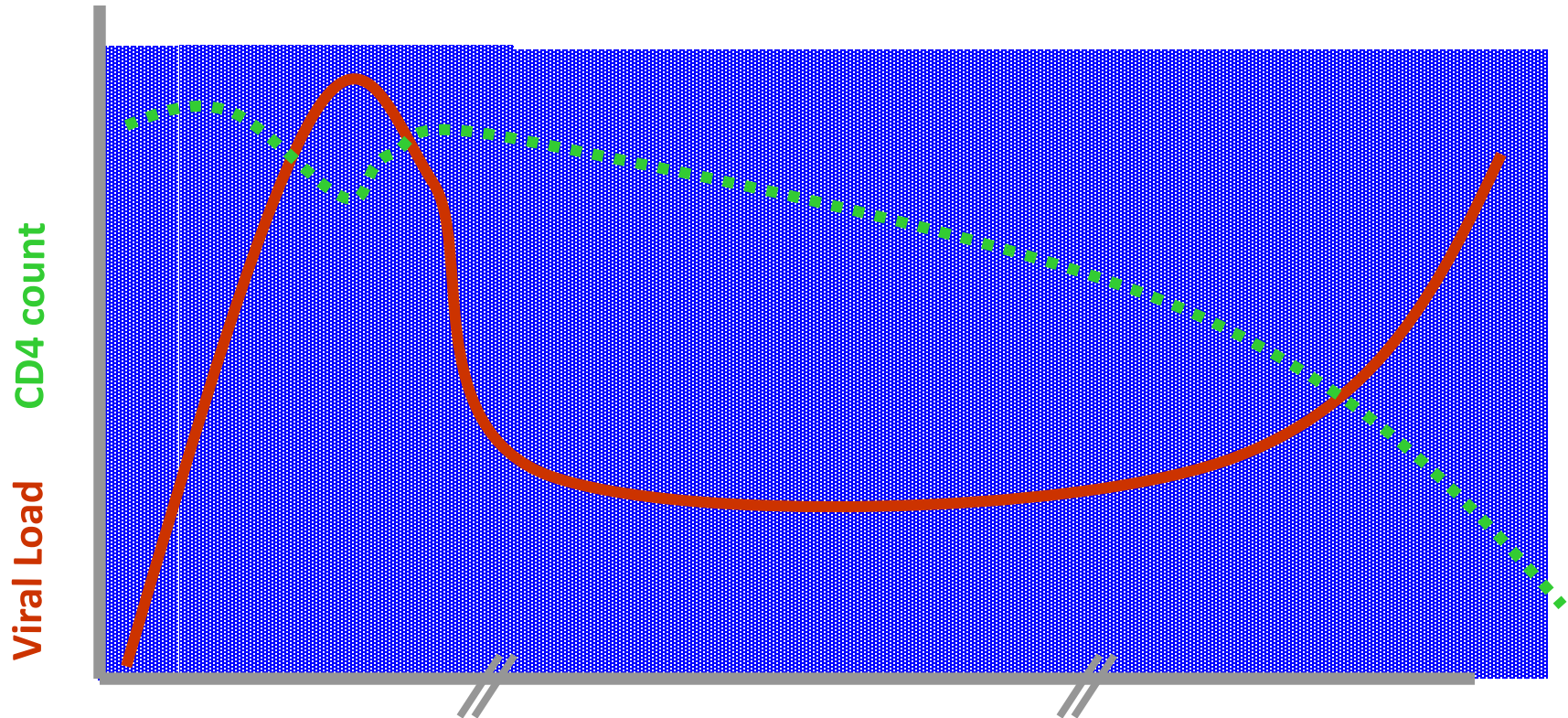
- First patient in 1981
- Director of first HIV Clinic in 1984
- Director of 6 others since; on 3 continents
- For all of this work it was ***absolutely*** necessary to physically encounter and examine the patient

# Binh Thanh OPC: The First 200 Patients



Nguyen Cong Hao and Stephen A. Klotz

# Natural History of HIV-1 Infection



# HIV Treatment in 2020

- Everyone with HIV is immediately placed on anti-retroviral drugs
- With new drugs every patient is generally undetectable for HIV RNA within 1 month—disease is controlled
- This preserves (or restores) immune cells and prevents transmission of HIV

# Current HIV Therapy

- Antiretroviral therapy (early and daily)
- See HIV patient once a year
- Laboratory tests twice a year

# My First HIV-Telemedicine Clinic for DOC in 2006

- Providing HIV Telemedicine to Pima County Jail and Arizona Department of Corrections since 2006.
- Monthly communication with DOC allowed for following laboratory and radiology results.



# What I Learned from doing Telemedicine to DOC

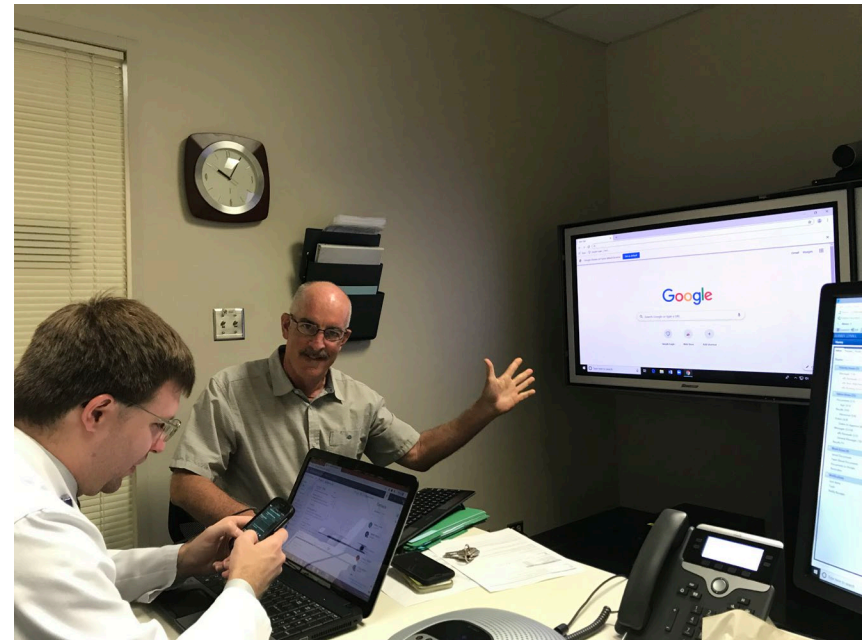
- Captive audience; no show rate practically zero
- Inmates pay attention; much more focused patient-doctor interaction than in “brick and mortar” clinics
- Excellent continuity of care; clinics conducted once a month since 2006; laboratory values and radiology results sent by FAX prior to the clinic date

# Before Clinic Day

- We use a DOC database to retrieve the names and records and enter our data into a Cerner patient record
- Krystal makes up the clinic list and enters the names and MRN into the database

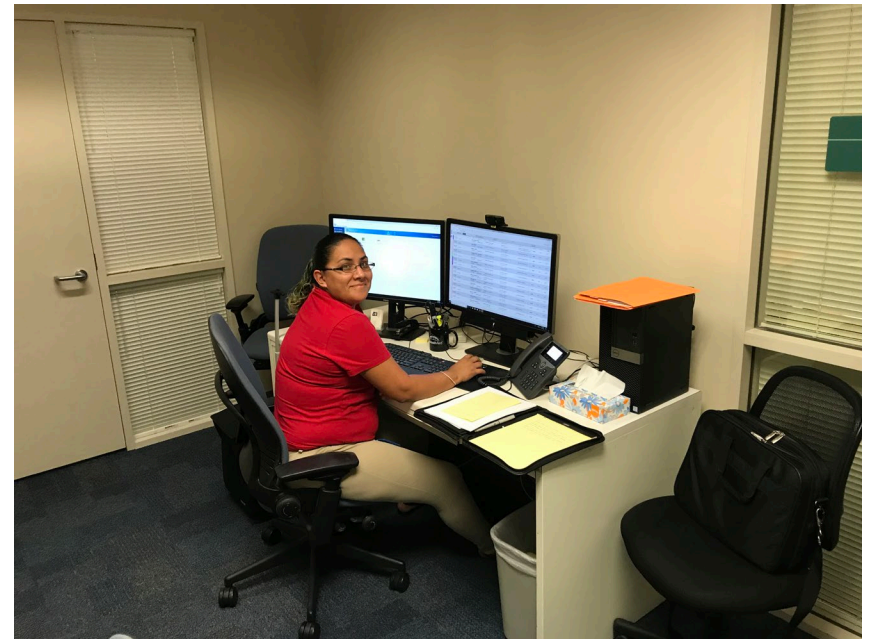
# Clinic Day: Connecting to the DOC

- Pete turns on all the equipment and insures we can reach all the DOC sites



# The database is accessed and list of clinic patients pulled up

- Krystal lets me know which patient is coming next onto the screen and provides me a patient folder with copies of all the lab results and notes of DOC physicians
- She also visits patients in jail to insure transitioning to civilian life



# Our video room

- Pharmacist Larry specializes in HIV drugs and attends every clinic
- He enters separate notes in the computer which is sent to the DOC
- I use a clinic note specific to HIV; a copy is FAXED to the DOC. The note has orders for drugs and laboratory monitoring as well as a suggested time for the next clinic visit



# Clinic visit

- There is a health care worker arranging the camera at the DOC site and patient flow
- Each clinic visit lasts from 10-15 minutes
- We can zoom in to some extent to visualize lesions



# Plans for new Programs

- HIV TelePharmacy: twice per year
- HIV TelePrEP statewide
- HIV clinic exclusively on Telemedicine

# Conclusions

- HIV is a disease made for Telemedicine
- Telemedicine is the future of HIV care